File with: lowe Ethics and Campsign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE

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MPAIGN DISCLOSURE BE

FAX

2009 JAN 20 PM 3: 44

7 42. 010 25. 75.	DISCLOSURE	30MMVL LYACE			
COMMITTEE NAME (Must be	same as on Statement of Org	enizetion)	EOD!		
Sodders For State Senate IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (11) Local Ballot Issue			FORM DR-2	DISCLOSURE	
			(Rev. 07 2007) DISCLOSURE REPORT For Office Use Orriv		
CANDIDATE COMMITTEES ONLY: Candidate Name Steve Sodders Office Sought State Senate		Political Party (if applicable) Democrate	Logged LG Scanned Consputer Audited 3		
		District (if Senate or House)			
Late reports are subject to possib Chry Wido SIGNATURE OF PERSON FIL	• <u> </u>	Oursuant to lowa Code sections 688.32A(7)	1/10/		
				موق بالمدور برانزينيون	
I AM FILING A Jan. 19, 200)	REPORT FOR (1) ELECTION /(2		YEAR.	
	part date)	Indicate by#	1_		
☐CHECK IF AMENDMENT TO	D REPORT DATED		cal Committees, enter	Date of Election	
CASH ON HAND at the beginn	ount MUST be the same as the	Total of all funds held by the e cash on hand at the end	3,917.1	0	
		first report filed.)	\$		
	Y TAKEN IN THIS PERIOD		2,(45.0	00	
Schedule A: Cash C	ontributions total (Attach Sche	edule A) (*aiso see in-kind below)	-		
Schedule F: Loans F	teceived total (Attach Schedu	de F)			
		ttach Schedule H)			
(Schedule P	l applies to Candidates' Cor	SUB-TOTAL	\$ 5,962.1	0	
Schedule B: Expend	•	B) (""also see debts and loans below)		00	
Schedule F: Loan R	epayments total (Attach Scher	dule F)	2.526.1		
CASH ON HAND at the end of	f this reporting period (if final r	report balance must be zero)	\$ 3,735.1		
"UNPAID BILLS (From Sche	dule D - Attach Schedule D)		\$		
"IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch	hadule E)	s		
"OUTSTANDING LOANS (Fr	om Schedule F - Attach Sche	dule F)	.,\$		
CONSULTANT BREAKDOW	N (Schedule G Attached?)		YE\$	<u>√</u> NO	
CANDIDATE COMMITTEES	ONLY:				
VALUE OF CAMPAIGN PRO	PERTY (From Schedule H - A	Attach Schedule H)	\$		
STATE COMMITTEES: Subm	nit a reconciled campaign acc	ount bank statement in January of each	year.		

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Reset Form

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
Sodders For State Senate	

SCHEDULE A (Rev. 07/03)	MONIITARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN, A LIST OF ID NUMBER'S IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE!* (if applicable)	AMOUNT RECEIVED	IF FOR FUND RAISER INCOME
10/30/08	CK# ₁₈₆₈₁	I.B.E.W. Educational Committee 900 Seventh Street, N.W. Washington, D.C. 20001		\$500.00	/
10/30/08	ID# CK#	Dale Shultz 822 Elliot Ct. Jowa City, IA 52246		\$50.00	
11/3/08	ID# CK#	Sue Seedorff-Keninger 1111 Mitchell St. Ackley, IA 50601		\$25.00	
11/3/08	1D# 9659 CK# 1553	Federation of Iowa Insurers PAC #9659 P.O. Box 1756 Des Moines, IA 50306-1756		\$250.00	/
11/3/08	ID# 8026 CK# ₁₈₈₂₁	I.B.E.W. Educational Committee 900 Seventh Street, N.W. Washington, D.C. 20001		\$500.00	✓
11/3/08	ID# 8025 CK# ₀₀₂₄₆₈	United Transportation Union PAC 14600 Detroit Avenue Cleveland, OH 44107		\$500.00	/
11/5/08	ID# 8228 СК# ₀₀₁₇₈₇₈	CWA-COPE PCC 501 3rd Street, NW Washington, D.C. 20001		\$100.00	_
11/22/08	ID# CK#	Elbert Permar 106 College View LN. Marshalltown, IA 50158-9121	·	\$20.00	
12/29/08	ID# 8478 CK# 1076	Siouxland Energy/Livestock COOP PAC 3890 Garfield Ave. Sioux Center, IA 51250		\$100.00	
	ID# CK#				
			SUB-TOTAL	2.045.00	

TOTAL (If last page of this schedule) \$ 2,045.00

Page 1 of 1 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumarne of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Resentant

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

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(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Sodders For State Scnate

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAMÉ AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/29/08	ID# _. CK#1082	Treat America Food Services 8500 Shawnee Mission Parkway, STE 100 Merriam, KS 66202	Cookies	\$ 72.00
10/29/08	ID# CK#1083	Staples 27 West Berle Rd. Marshalltown, IA 50158	Printer ink	\$ 41.72
10/30/08	ID# CK#	Aubum Quad, Inc. P.O. Box 390728 Cambridge, MA 02139	Credit card processing fee	\$1.98
11/3/08	ID# CK#	Auburn Quad, Inc. P.O. Box 390728 Cambridge, MA 02139	Credit card processing fee	.99
11/5/08	ID# CK#1084	Jason Ascher 1623 Parktown Ct. S-5 Cedar Rapids, IA 50242	Reimbursement for ice	\$15.23
11/5/08	ID# CK#1085	Steve Sodders P.O. Box 723 State Center, IA 50247	Milage reimbursement	\$2,095.08
	ID# CK#		2	
	ID# CK#			ا کافاندیار بر بر بروی در
	<u> </u>		SUB-TOTAL	\$ 2,227.00

TOTAL (If last page of this schedule)

\$ 2,227.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail iterrized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the cancidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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